

# APPLICATION for TERMINATION or CONSOLIDATION of permits covered under the Wyoming Pollutant Discharge Elimination System (WYPDES)



Official Use Only  
Date received:

Use this form to terminate or consolidate permits that discharge waste water to a surface water of the state of Wyoming. This form should be used ONLY to terminate a permit that has more than 180 days before its designated expiration date. If a permit has less than 180 days to its expiration date and WYPDES coverage is no longer needed for that permit, then a notice of termination is not required and the Water Quality Division (the Division) will allow the permit to expire on the date indicated in the permit. If the permittee plans to continue to discharge waste water from this facility after the permitted expiration date, then a permit renewal application must be received by the Division at least 180 days prior to that date. If the permittee plans to continue to discharge waste water from this facility after its expiration date and no renewal application is received by the Division, then the permittee will be required to stop discharging until a new permit is applied for and issued by the Division.

If the permittee wishes to terminate permits that will be combined with (or transferred to) another permit, all terminating permits must have a separate termination application. Each terminating permit will complete a 30 day public notice period prior to its termination.

Please complete the following information for each permit that you wish to terminate.

<b>Company Contact Name</b>	<b>Consultant Contact Name</b>
<b>Company Name</b>	<b>Company Name</b>
<b>Mailing Address</b>	<b>Mailing Address</b>
<b>City, State, Zip Code</b>	<b>City, State, Zip Code</b>
<b>Telephone Number</b>	<b>Telephone Number</b>
<b>E-Mail Address</b>	<b>E-Mail Address</b>

Permit number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name of the facility producing the discharge (the facility name that appears on the WYPDES permit):

\_\_\_\_\_

Immediate Receiving Stream(s): \_\_\_\_\_

General Facility Location: Township(s) \_\_\_\_\_ Range(s) \_\_\_\_\_

Reason for termination: \_\_\_\_\_

If the reason for termination is to combine permits that are located within the same drainage, in order to be covered under one WYPDES permit, indicate the permit that this terminated permit will be transferred to (the permit that it will be combined with): \_\_\_\_\_

Please note that in order for the combination to be complete, the permittee must apply for and be issued, a separate permit renewal or modification that incorporates the transferred/ terminated permit. All permits involved must complete a 30 day public notice period. Also be advised that the terminating permit cannot be completed until the permit it has been transferred to has been issued.

For a permit termination due to consolidation, list each outfall in the table below, its original permit number and the permit number that it will be transferred to.

If the reason for termination is that the outfalls are no longer needed (i.e. the wells associated with the outfalls are no longer producing water, or the outfalls have never been constructed), then submit photographs demonstrating reclamation, and on the back of this application, list the steps taken to prevent discharge from all outfalls involved.

For a permit termination due any reason other than consolidation, list each outfall in the table below, its permit number and state "terminate".

<i>outfall number</i>	<i>original permit number</i>	<i>transferred permit number or "terminate"</i>

*I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I am requesting the termination of \_\_\_\_\_ (fill in number) outfalls.*

<i>Printed Name of Person Signing*</i>	<i>Title</i>
<i>Signature*</i>	<i>Date</i>

\*All permit termination applications must be signed in accordance with *Section 14, Chapter 2 of the Wyoming Water Quality Rules and Regulations*, "for" or "by" signatures are not acceptable.

Section 35-11-901 of Wyoming Statutes provides that:

Any person who knowingly makes any false statement, representation, or certification in any application ... shall upon conviction be fined not more than \$10,000 or imprisoned for not more than one year, or both. Permittees are required to retain records of all data used to complete permit termination applications in accordance with *Chapter 2, Section 5, Part 5.V.vii of the Wyoming Water Quality Rules and Regulations*.

Mail this application to:

WYPDES Permits Section  
Department of Environmental Quality/WQD  
200 W. 17th St. 4th Floor  
Cheyenne, WY 82002